PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as

indicated unless correct maintenance fee notifica	ed below or directed ot itions.	herwise in Block I, by (a	· ·	•			arate "FEE ADDRESS" for
CURRENT CORRESPOND	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
772]3	7590 03/05	/2009	•				
Novak Druce 1300 Eye Street, Suite 1000, Wes	I S a tı	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
Washington, DC	, 20003						(Depositor's name)
							(Signature)
			Ĺ				(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	OR	АТТО	RNEY DOCKET NO.	CONFIRMATION NO.
10/577,354	05/03/2007		Paul Alexander De Vr	Vries		8674.038.US0000 5204	
		NG MOLTEN METAL D					
APPLN, TYPE	SMALL ENTITY	IS SUE FEE DUE	PUBLICATION FEE DU	JE PREV. PAID ISSU	JE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0		\$1810	06/05/2009
EXAMINER		ART UNIT	CLASS-SUBCLASS	\neg			
MCGUTHRY BANKS, TIMA MICHELE		1793	075-588000				
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up or agents OR, altern (2) the name of a sin registered attorney of	single firm (having as a member a 2 QUIGG DIF 2 or agent) and the names of up to attorneys or agents. If no name is 3 ill be printed.			
		A TO BE PRINTED ON T	**	• • •			
PLEASE NOTE: Unl recordation as set fort	less an assignee is ident h in 37 CFR 3.11. Com	ified below, no assignee pletion of this form is NO	data will appear on the T a substitute for filing	e patent. If an assigr an assignment,	nee is id	entified below, the d	locument has been filed for
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) ALERIS SWITZERLAND GMBH Schaffhausen, Switzerland							
Please check the appropr	iate assignee category or	categories (will not be pr	inted on the patent):	Individual 🗵 C	orporatio	on or other private gro	oup entity Government
	are submitted: No small entity discount p	 Payment of Fee(s): (Please first reapply any previously paid Issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 14-1437 (enclose an extra copy of this form). 					
5. Change in Entity Sta	tus (from status indicate	d above)					
• • •	s SMALL ENTITY state		b. Applicant is no l	-			
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if requeecords of the United Sta	uired) will not be accepted tes Patent and Trademark	office.	in the applicant; a reg	istered a	ttorney or agent; or th	he assignee or other party in
Authorized Signature	Anthon	4.11D		Date #	pr.	3,2009 31,674	
Typed or printed nam	e Anthony	P. Venturin	10	Registration 1	No	31,674	
This collection of informan application. Confiden	nation is required by 37 C tiality is governed by 35 d application form to the	CFR 1.311. The information U.S.C. 122 and 37 CFR USPTO. Time will vary	on is required to obtain of 1.14. This collection is depending upon the in				d by the USPTO to process) ng gathering, preparing, and me you require to complete

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandra, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.